

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RS		04/10/00
O.I.P.E. CLASSIFIER		15	4/14/00
FORMALITY REVIEW	RS	67369	6/15/00
RESPONSE FORMALITY REVIEW	RS	67369	8/18/00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	6/14/00
2	6/14/00
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50	6/14/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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